Under Medicaid You Have the Responsibility to:

- Show your health plan card to all providers before receiving services.
- Never let anyone use your card who is not covered.
- Choose a primary provider. Then contact and build a relationship with the provider you have chosen.
- Make appointments for routine checkups and vaccinations.
- Keep your scheduled appointments.
- Provide complete information about your past medical history.
- Provide complete information about current medical problems.
- Ask questions regarding your care.
- Follow your provider's medical advice.
- Respect the rights of other patients and health plan employees.
- Use emergency room services only when you believe an injury or illness could result in lasting injury or death.
- Notify your primary provider if emergency treatment was necessary and follow-up care is needed.
- Make prompt payment for services not covered by Medicaid.
- Report changes that may affect your coverage. This could be an address change, birth of a child, death, marriage, or divorce.
- Promptly apply for Medicare or other insurance when you are eligible.
- Report other insurance benefits when you are eligible.

Complaints About Your Health Plan

If you have complaints or concerns about your health care or your health care provider, there are things you can do.

- 1. You can call or write a letter to your health plan about your complaint or concern. Often they can help you immediately. If you are not satisfied, you have the right to file a grievance. Be sure to read your health plan's handbook for further instructions.
- 2. You can also write or call the Michigan Department of Community Health (MDCH) regarding your complaint.

Michigan Department of Community Health Medical Services Administration PO Box 30470 Lansing, MI 48909-9753 1-800-642-3195

3. You can appeal a health plan decision you do not agree with by requesting a hearing. Contact MICHIGAN ENROLLS and ask for a Request for Hearing form.

MICHIGAN ENROLLS
PO Box 30412
Lansing, MI 48909
1-888-ENROLLS (1-888-367-6557)
TTY: 1-888-263-5897

You can take any of these actions at any time.



John Engler, Governor
James K. Haveman, Jr., Director
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If you receive Medicaid and belong to a health plan



When you get Medicaid, you are receiving special health care benefits from the State of Michigan.

It is important to know what your rights and responsibilities are for this program.

You need to know these things to ensure that you receive the best possible care and treatment.

Know the process...

- 1. If you are found eligible for Medicaid you will receive information from MICHIGAN ENROLLS. This information will tell you how to sign up for a health plan.
- 2. You must choose a health plan that is listed for your area. If you have a serious medical condition and your doctor is not in a health plan, you may not be required to join a health plan. You should contact MICHIGAN ENROLLS with any questions you have regarding this process.
- 3. You will need to choose a primary provider, like a doctor, who works with your health plan.
- 4. You must complete the enrollment information and mail the form to MICHIGAN ENROLLS, or call MICHIGAN ENROLLS at 1-888-367-6557, or come to an informational meeting in your area.
- 5. You will receive a card and more information from the health plan you have chosen.

Under Medicaid You Have the Right to:

- Receive quality health care.
- Be treated with respect.
- Be seen by a primary provider who will arrange the care you need.
- Get all the facts from your primary provider about your health and treatment.
- Know about experimental procedures or treatments that have been proposed for your care.
- Say no to any medical treatment you disagree with.
- A second medical opinion.
- Be told what services are covered by Medicaid.
- Know if a co-payment is required.
- Know how your health plan works and the services available.
- Know the names and backgrounds of your health care providers.
- Choose your primary provider.
- Change your primary provider by following the rules of the health plan.
- Change plans for any reason during the first 90 days of enrollment.
- Change plans during certain times of the year.
- Request disenrollment from your health plan for good cause.
- Get help with any special disability needs you may have.
- Get help with any special language needs you may have.

- Ask for an exception from enrolling in a health plan if you have a serious medical condition and your doctor is not in a health plan.
- Tell your primary provider how you wish to be treated if you ever become too ill to decide for yourself.
- Be told in writing when and why benefits are being reduced or stopped.
- Have your medical records kept confidential.
- Get a copy of your medical records.
- Voice your concern about the service or care you receive.
- Contact your health plan with any questions or complaints that you may have.
- Use the health plan's grievance procedure to resolve problems.
- Contact the Michigan Department of Community Health with any questions or complaints that you may have.
- Appeal any denial or reduction of Medicaid eligibility or service.

Medicaid must assure necessary transportation. You can get help in getting a ride if:

- You do not have a way to get to and from a doctor visit or
- You do not have a way to get medical items or services covered by Medicaid.

This policy also applies to dentist visits and getting dental items or services covered by Medicaid.

In some cases, the rides you need must be approved in advance.